PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where

indicated unless correct maintenance fee notifica	ed below or directed oil	herwise in Block 1, by (a	a) specifying a new co	respondence address	; and/o	mailed to the current r (b) indicating a sepa	correspondence address as rate "FEE ADDRESS" for
CURRENT CORRESPOND		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
SCULLY SCO 400 GARDEN (SUITE 300	NOV 2 9 2006						
GARDEN CITY	1,111 11330	\# <u>#</u>					(Depositor's name)
		W.	FRADENA				(Signature)
							(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT			RNEY DOCKET NO.	CONFIRMATION NO.
10/669,306 TITLE OF INVENTION	09/24/2003 I: METHOD AND SYST	TEM FOR IDENTIFYING	John A. Darringer G ERRORS IN COMPL	YOR9200302 TER SOFTWARE	ડ પં પડ	5 I (16769)	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	JE PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$0		12/01/2006
EXAM	IINER	ART UNIT	CLASS-SUBCLASS	\neg			
PUENTE, EMERSON C		2113	714-038000				
CFR 1.363). Change of corresp Address form PTO/S XXX "Fee Address" ind	ence address or indication on the condence address (or Chab 122) attached. It cation (or "Fee Address or more recent) attached.	inge of Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. SCUTY, SCULY, Murphy & Presser, P.C. 2 2 3 Rafæel Perez-Pineiro, Esq.				
PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI	less an assignee is ident th in 37 CFR 3.11. Comp GNEE	A TO BE PRINTED ON ified below, no assignee pletion of this form is NO	data will appear on the T a substitute for filing (B) RESIDENCE: (Clation	e patent. If an assign an assignment. TY and STATE OR (11/50/ Armonk, 13, New	COUNT 2226 (1 Xor)	TRY) AHTED2 G3333928 ! k	
Please check the appropr	riate assignee category or	categories (will not be pr	rinted on the patent):	Individual XX C	orporati	ion or other private gro	up entity Government
4a. The following fee(s) System Fee Ypublication Fee (N Advance Order -	No small entity discount p	D. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0510/18Mose an extra copy of this form).					
	ns SMALL ENTITY state	d above) us. See 37 CFR 1.27.	☐ b. Applicant is no	longer claiming SMA	LL EN	TITY status. See 37 CF	FR 1.27(g)(2).
NOTE: The Issue Fee an interest as shown by the	nd Publication Fec (if req records of the United Sta	uired) will not be accepte tes Patent and Trademark	d from anyone other that Office.	in the applicant; a reg	istered :	attorney or agent; or th	e assignee or other party in
Authorized Signature	Sturm	1		Date		ovember 1, 20	06
Typed or printed nameSteven Fischman,			-	Registration No.			
This collection of inform an application. Confident submitting the complete this form and/or suggest	nation is required by 37 C stiality is governed by 35 d application form to the ions for reducing this bu	CFR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the process of the control of t	on is required to obtain 1.14. This collection is depending upon the in e Chief Information Of	or retain a benefit by estimated to take 12 dividual case. Any co ficer, U.S. Patent and	the pub minutes omment Traden	lic which is to file (and s to complete, includin is on the amount of tin nark Office, U.S. Depa	by the USPTO to process) g gathering, preparing, and ne you require to complete rtment of Commerce, P.O.

13-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.